PTO/SB/05 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032 U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Attorney Docket No. UTILITY PATENT APPLICATION First Inventor TRANSMITTAL Title (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Commissioner for Patents APPLICATION ELEMENTS Mail Stop Patent Application ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria VA 22313-1450 CD-ROM or CD-R in duplicate, large table or 1. 🔀 Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Computer Program (Appendix) 2. Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) з. 🔀 Specification [Total Pages Computer Reader Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D i. CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix ii. Paper Background of the Invention - Brief Summary of the Invention c. Statements verifying identity of above copies - Brief Description of the Drawings (if filed) - Detailed Description **ACCOMPANYING APPLICATION PARTS** - Claim(s) - Abstract of the Disclosure Assignment Papers (cover sheet & document(s)) 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 5. Oath or Declaration [Total Sheets 11. E English Translation Document (if applicable) a. Newly executed (original or copy) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1499 Citations Copy from a prior application (37 CFR 1.63(d)) 13. L **Preliminary Amendment** (for continuation/divisional with Box 18 completed) 14. 🔀 Return Receipt Postcard (MPEP 503) (Should be specifically itemized) **DELETION OF INVENTOR(S)** 15. Certified Copy of Priority Document(s) Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: of prior application No.: 09/867003 Continuation-in-part (CIP) Continuation Divisional Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS (linser) Customer No. or Attach bar code label here) Customer Number or Bar Code Label OR Correspondence address below Name BURTON H. SAGE 3430 BERNARDINO LANE Address

Country

USA

Telephone
760 574 0880

Fax
760 579 0330

Name (Print/Type)
BURTON SACE
Registration No. (Attorney/Agent)

Signature

Date
6/20/2003

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State

CA

Zip Code

9208*4*

City

VISTA

This collection of information is required by 37 CFR 1.53(b). The information agregatined to obtain or retain a benefit by the public which is to file (and by the USP10 to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (05-03)
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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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pond to a collection of information unless it displays a valid UMB control number.					
Complet if Known					
Application Number					
Filing Date					
First Named Inventor					
Examiner Name					
Art Unit					
Attorney Docket No.					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:	<u>Large</u>	Entity	Small	Entity	•	
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid_
Account Number	1051	130	2051		Surcharge - late filing fee or oath	T CE T AIM
Deposit	1052	50	2052	25	Surcharge - late provisional filing fee or	
Account Name	1053	130	1053	120	cover sheet Non-English specification	
The Director is authorized to: (check all that apply)		2,520			For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804		Requesting publication of SIR prior to	
Charge any additional fee(s) during the pendency of this application					Examiner action	\vdash
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION 1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 275 Hillity Sling for	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375, 40	1452	110	2452	55	Petition to revive - unavoidable	\vdash
		1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from		1,300	2501		Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims Solution So	1502	470	2502		Design issue fee	
Independent 3 2 2 0	1503	630	2503		Plant issue fee	\vdash
Claims -3" U A H H H H H H H H H H H H H H H H H H	1460	130	1460		Petitions to the Commissioner	
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt Recording each patent assignment per	
Code (\$)	8021	40	802	1 40	property (times number of properties)	
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be	
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375	examined (37 CFR 1.129(b)) Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802		Request for expedited examination of a design application	
Other fee			ecify) _			
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic I	Filing F	ee Paid SUBTOTAL (3) (\$)	0-

SUBMITTED BY (Com	
Name (Print/Type) Registration No. (Attorney/Agent) Telep	phone 760 579 0880
Signature Sunta W. Sog. h. Date	June 20, 2003

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